

Please answer all questions. Where a question is not applicable, enter "N/A". Attach extra sheets if needed. Refer to item number when explaining any item.

ixcici to itcin numbei	when explaining	ing item.		
1. Trade Name		<u>-</u>		
Manufacturer				
Address				
City	State	Zip Code	Phone #	
Website		E-mail		
2. Local Distributor				
Address				
City	State	Zip Code	Phone #	
Website		E-mail		
3. Brief Description of	Product			
4. Recommended Uses	S			
6. General Compositio	on of Material (Attac	ch Laboratory Report V	Vhen Applicable)	
7 Alternate for What I	Existing Product?			
7. Alternate for what i	Existing Froduct: _			
		Date Intr	oduced on Market	
8. Cost Per Unit Mate	erial (F.O.B.)			
		d with this application	when applicable:	
		ed by Manufacturer?		
Instructions for Installation Furnished?			Yes □ No □	
Material Safety Data Sheets Required?			Yes □ No □	
Material Safety Data Sheets Furnished?			Yes □ No □	
10. Product Meets the			105 = 110 =	
AASHTOASTM			Federal Spec	
0.4				
11 List Other Highwa	v Agencies Who Ar	re Testing or Have App	proved Products:	
			Std. Use	
Contact Person	P	none #	5ta. 550	
Agency	F:	xn Use	Std. Use	
Contact Person		none #		
Agency	F	xp. Use	Std. Use	
Contact Person	P	ione #	Std. Osc	
12 Information Furnic	hed Ry		Phone #	
Date Completed	лоа Dy		I none π Fax #	
Return Address:			Fax # E-mail	
Maine Department of T	rancportation		E-man	
Bureau of Planning, Tra		on		
		Oordinator Phone: (207	0 624-3268	

Attention: Doug Gayne, Product Approval Coordinator Phone: (207) 624-3268

16 State House Station Fax: (207) 624-3301

Augusta, ME 04333-0016 E-mail: Doug.Gayne@Maine.gov

Note: Please include Materials Technical Data Sheet, Installation Instructions, and MSDS for each submittal.